

## Northeast Delta Dental Standard Payment Method And Procedures For Active Orthodontic Cases

1. Orthodontic treatment commenced while a patient is eligible for Orthodontic benefits (Coverage D):

- a. Northeast Delta Dental's liability for Orthodontic cases is incurred on the date the initial bands, or segment thereof, or device is placed in the patient's oral cavity. Prior to rendering this service, a predetermination claim form is submitted to Northeast Delta Dental by the dental office.

Northeast Delta Dental will determine its liability for the case, subject to the patient's continued eligibility.

- b. Once bands or orthodontic devices are placed in the patient's mouth the predetermination form may be submitted for payment. Northeast Delta Dental's payment procedure is a one-step method. At the time the predetermined claim is returned to Northeast Delta Dental by the dental office all of the pre-calculated Northeast Delta Dental liability will be paid, subject to the patient's eligibility.

### EXAMPLE

Total Case Fee: (including retention & post-treatment recall exams)	\$ 3,000.00	
Total Approved Case Fee:	3,000.00	
Initial Fee:	600.00	Payment By Northeast Delta Dental On Date Of
Monthly Fee:	100.00	Banding/Device Placement.
Program Maximum:	1,000.00	\$1,000.00
Active Months in Treatment:	24 months	
Co-Payment %	50%	
Northeast Delta Dental's Liability:	1,000.00	

After the case has been predetermined by Northeast Delta Dental, the submission of the initial claim is all that is required by the dental office for payment to be generated for the case.

2. Orthodontic treatment commenced prior to the patient being eligible for Orthodontic benefits (Coverage D):

- a. Orthodontic cases in progress when a patient becomes eligible for Coverage D will be paid from the date of the patient's eligibility, so long as the patient is still in active braces. An initial claim form must be submitted to Northeast Delta Dental by the dental office.

Northeast Delta Dental will determine its liability for the case and make one payment for its total liability upon receipt of the claim form.

### EXAMPLE

<b>Total Case Fee:</b> (including retention & post-treatment recall exams)	\$ 3,000.00	
Total Approved Case Fee:	3,000.00	
Initial Fee:	600.00	
Monthly Fee:	100.00	
Program Maximum:	1,000.00	Northeast Delta Dental
Active Months in Treatment:	24 months	Payment:
*Length of Active Treatment Remaining:	8 months	\$500.00
Approved Charge for Payment (8/24 of \$3,000.00)	1,000.00	
Co-Payment %	50%	
Northeast Delta Dental's Liability:	500.00	

\*The estimate for remaining length of active treatment should be based on the experience of similar past cases. In the few cases where the length of active treatment exceeds the estimated treatment time remaining, Northeast Delta Dental will, upon request, review the case for additional payment.

- b. In the case of a takeover group where Northeast Delta Dental has received orthodontic maximums paid by the prior carrier, Northeast Delta Dental's orthodontic payment plus the amount already paid by the prior carrier will not exceed Northeast Delta Dental's lifetime orthodontic maximum.

The submission of the initial claim form represents all that is required by the dental office for payment to be generated.

NOTE - The fees used in these 'Examples' are arbitrary and were used to simplify the mathematics involved.

3. Recall and retention examinations will be processed and paid as follows:

- a. Pre-treatment Recall Exam  
Prior to commencing active treatment it may be necessary to reevaluate the patient on a continuing basis for a number of years. These pre-treatment exams and recall exams should be billed as they occur and will be paid as a diagnostic service, not subject to the orthodontic maximum.
- b. Retention Visits  
After active treatment has ceased, many patients enter a phase where the patient wears a retainer for a period of time. Appointments to the dental office may, or may not, be on a schedule, such as monthly. The fee for retention visits must be included in the Total Case Fee when filing for payment. These services should not be billed as separate items. For cases where a patient acquires orthodontic coverage while in retention no orthodontic benefits can be paid by Northeast Delta Dental.
- c. Post-treatment Recall  
After a patient has successfully completed all orthodontic treatment, active and retention, one or more post-treatment recall visits may be established to verify the conclusion and whether additional orthodontic services are required. These services should not be billed as separate items because they are included in the Total Case Fee. For cases where a patient acquires orthodontic coverage following active treatment and, if necessary, retention, no orthodontic benefits can be paid by Northeast Delta Dental.

4. Age limitations: It is standard policy to limit orthodontic coverage to dependent children from age eight to age nineteen.

5. No Age Limitations: (Commonly referred to as adult orthodontics): Some of Delta's programs currently extend coverage over age nineteen or beyond dependent children.

- a. Dependent children: Minimum age before commencement of treatment is eight years old due to prudent professional reasons. There is no maximum age so long as the patient remains covered under Northeast Delta Dental's definition of a covered dependent child.
- b. Subscriber or Spouse There is no age limitation so long as the patient remains covered under Northeast Delta Dental's definition of a covered subscriber or spouse.